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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL
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SEC USE ONLY

DATE RECEIVED

Serial

Prefix



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPT	TION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock and the Common Stock issuable upon conversion thereof.	A-OSINED CO
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA	ULOF NOV 2 0 2003
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) PicoNetics, Inc.	181/8
Address of Executive Offices (Number and Street, City, State, Zip Code) 5020B Brandin Court, Fremont, CA 94538	Telephone Number (Including Area Code) (510) 687-9457
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same as above	Telephone Number (Including Area Code) Same as above
Brief Description of Business Computer chip design.	
Type of Business Organization corporation	other (please specify): NOV 21 2003
Actual or Estimated Date of Incorporation or Organization: Month Year 9 9	Actual Estimated THOMSON

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

D

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

<u> </u>		A. BASIC IDENT	IFICATION DATA		
Each beneficial ow securities of the issEach executive offi	ne issuer, if the issuer, if the issuer, if the pouer; cer and director of	owing: uer has been organized with ower to vote or dispose, or corporate issuers and of co	nin the past five years;		more of a class of equity
		partnership issuers.	5-71		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Wu, Jianbin	findividual)				
Business or Residence Addre c/o PicoNetics, Inc	•	reet, City, State, Zip Code) Court, Fremont, CA 9453			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Pak, Ignatius	f individual)				
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			
c/o PicoNetics, Inc	., 5020B Brandin	Court, Fremont, CA 945.	38		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, in Lin, Jaff	f individual)				
Business or Residence Addre c/o PicoNetics, Inc	•	reet, City, State, Zip Code) Court, Fremont, CA 945.			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, in Tsai, Steven	findividual)				
Business or Residence Addre c/o PicoNetics, Inc	•	reet, City, State, Zip Code) Court, Fremont, CA 945.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, it Kim, Paul H.J.	findividual)				
Business or Residence Addre	•	reet, City, State, Zip Code) Court, Fremont, CA 945			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, in Lu, Keh-Shew	f individual)				
Business or Residence Addre	•	reet, City, State, Zip Code) Court, Fremont, CA 945			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i Gibson, William	f individual)				
Business or Residence Addre		reet, City, State, Zip Code) Court, Fremont, CA 945			· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre		reet, City, State, Zip Code) Court, Fremont, CA 945			

		A. BASIC IDENTI	FICATION DATA			
Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and • Each general and managing partner of partnership issuers.						
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if in Maton Fund II L.P.						
Business or Residence Address 11615 Lark Avenue,	•					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in CrossRoads Venture		P				
Business or Residence Address 155 Montgomery Str	•	eet, City, State, Zip Code) an Francisco, CA 94104				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if in Parakletos Inc.	ndividual)					
Business or Residence Address 175 Nortech Parkwa	*					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if it WK Global Investm		nd affiliates				
Business or Residence Address 1021 S. Wolfe Road,	•					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)					
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if in	ndividual)					
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)	-			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if it	ndividual)					
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)		-		

					B. INFOR	MATION	ABOUT O	FFERING					
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No					
2. W	hat is the mi	nimum inv	estment th	nat will be	accepted fi	rom any ind	lividual?				\$ <u>N/A</u>		
	2. What is the minimum investment that will be accepted from any individual?								Yes	No			
	J. J							\boxtimes					
a st	nter the informalission or person to be ates, list the oker or deale	similar realisted is an ame of the	muneration n associate ne broker	n for solic ed person or dealer.	itation of p or agent of If more tl	ourchasers in a broker of han five (5)	n connection r dealer reg) persons to	n with sales istered with be listed a	of securities the SEC an	s in the offe id/or with a	ring. If state or		
Full Na	ame (Last na NONE	me first, if	individual)									
Busine	ss or Resider	nce Addres	s (Number	r and Stree	et, City, Sta	te, Zip Cod	e)						
Name	of Associated	Broker or	Dealer					*					
	in Which Per eck "All State											A1	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]	[ID]
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[MT] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	.]
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Full N	ame (Last na	me first, if	individual)			<u>, , , , , , , , , , , , , , , , , , , </u>						
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Name	of Associated	d Broker or	Dealer										
	in Which Per eck "All State											☐ A1	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[I D]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M0)]
[MT	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	.]
[RI]	[SC]	[SD]	[TN]	[TX]	[TU]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P F	.]
Full N	ame (Last na NONE	me first, if	individua)									
Busine	ss or Resider	nce Addres	s (Numbe	r and Stree	et, City, Sta	ite, Zip Coc	le)		- Partition and		Maria de la companiona de		
Name	of Associated	Broker o	r Dealer										
	in Which Per												Il States
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[RI]		[SD]	[NH]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PF	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
K.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$12,000,000.00	\$10,000,000.00
			-
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0	\$ <u>0</u>
	Other (Specify)	\$ <u>0</u>	\$0
	Total	\$12,000,000.00	\$10,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	·	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	22	\$10,000,000.00
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)	0	\$0
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$
	Regulation A	N/A	\$
	Rule 504	N/A	\$
	Total	<u>N/A</u>	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] s
	Printing and Engraving Costs		\$
	Legal Fees		\$To Be Determined
	Accounting Fees		\$
	Engineering Fees]
	Sales Commissions (specify finder's fees separately)		s
	Other Expenses (identify)] \$
	Total	<u>S</u>	\$To Be Determined

•	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PROCI	EEDS
ť	b. Enter the difference between the aggregate offering price given in response Question I and total expenses furnished in response to Part C - Question 4.a. This difference adjusted gross proceeds to the issuer."	nce is the	\$ 12,000,000.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to for each of the purposes shown. If the amount for any purpose is not known, furnish an and check the box to the left of the estimate. The total of the payments listed must eadjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.	estimate	
		Payments Officers, Directors Affiliates	, & Payments To
	Salaries and fees	□ \$	\$
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery and equipment	□ \$	_ 🗆 🕏 \$
	Construction or leasing of plant buildings and facilities	S	s
	Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ s	□ \$
	Repayment of indebtedness		
	Working capital		
	Other (specify):		
		□ \$	
	Column Totals	□ \$	⋈ \$12,000,000.00
	Total Payments Listed (column totals added)		⊠ \$12,000,000.00
	D. FEDERAL SIGNATURE		
foll	e issuer has duly caused this notice to be signed by the undersigned duly authorized pe owing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities an staff, the information furnished by the issuer to any non-accredited investor pursuant to para	d Exchange Commissi	on, upon written request of
	oNetics, Inc. Signature Gail Surveya	Date November 4,	2003
	me or Signer (Print or Type) Title of Signer (Print or Type) il Suniga Assistant Secretary		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)